

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 701998 (7)

1. Corporation Name

ALOMA UNITED METHODIST CHURCH, INC.



Principal Place of Business

Mailing Address

ALOMA METHODIST CHURCH INC
3045 ALOMA AVENUE
WINTER PARK FL 32792

3045 ALOMA AVE.
~~3045 ALOMA AVENUE~~
WINTER PARK FL 32792-3702
US

3. Date Incorporated or Qualified
02/08/1961

3a. Date of Last Report
03/30/1995

2. Principal Place of Business

2a. Mailing Address

21

26

ALOMA UNITED METHODIST CHURCH

59-6046991

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TRICKEL, WILLIAM., JR
39 WEST PINE STREET
ORLANDO FL 32801

81 Name

Patton, Walter B.

82 Street Address (P.O. Box Number is Not Acceptable)

3045 Aloma Ave.

83

84 City

Winter Park

FL

85 Zip Code
32792

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Walter B. Patton

Walter B. Patton, P/D

4/11/96

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME TD
STREET ADDRESS KELLY, MYRA
CITY-ST-ZIP 2418 TIOGA TRAIL
WINTER PARK FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME TRC
STREET ADDRESS PATTON, WALTER B
CITY-ST-ZIP 601 BERWICK DR
WINTER PARK FL

2.1 TITLE P/D ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME TR
STREET ADDRESS RADER, JOHN L
CITY-ST-ZIP 3307 BALSAM DR
WINTER PARK FL

3.1 TITLE V/D ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☒ DELETE
NAME SD
STREET ADDRESS PANTELAS, SUSAN
CITY-ST-ZIP 211 CORNWALL RD
WINTER PARK FL

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME D
4.3 STREET ADDRESS Turner, Charles T.
4.4 CITY-ST-ZIP 1860 Kewanee Trail
Fern Park, FL 32730

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME D
5.3 STREET ADDRESS Embree, Donna
5.4 CITY-ST-ZIP 2538 Eastbrook Boulevard
Winter Park, FL 32792

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME D
6.3 STREET ADDRESS Shaw, Theresa
6.4 CITY-ST-ZIP 4419 Foreland Place
Orlando, FL 32812

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Walter B. Patton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Walter B. Patton

4/11/96

407-671-2180 or
407-644-9199

Date

Daytime Phone #

CR2E037 (12/95)